DOCUMENT RESUME

ED 283 064 CG 019 953

AUTHOR Lopez, Gil
TITLE A Plan to Improve Psychological Services from the Public School System to the Private School Sector.
PUB DATE 1 Nov 86
NOTE 67p.; Ed.D. Practicum, Nova University.
PUB TYPE Dissertations/Theses - Practicum Papers (043)

EDRS PRICE MF01/PC03 Plus Postage.
DESCRIPTORS *Consultation Programs; *Educational Cooperation; Elementary Secondary Education; Exceptional Persons; Institutional Cooperation; Interschool Communication; Practicums; *Private Schools; *Psychoeducational Methods; *Psychological Services; *Public Schools; Referral; School Counseling; School Psychologists

ABSTRACT

This practicum was designed to improve the quality of psychological referrals from private schools to the public school system by establishing a consultative conference procedure. The primary purpose of the conference was to establish open communication between teachers and the school psychologist and to provide more immediate psychoeducational alternatives for teachers to implement in the classroom. Consultative services hence became available to all cases regardless of eligibility for psychoeducational testing. A program was established wherein each referral went through the consultative conference procedure with teachers from the referring private school, parents, and school psychologist present at the meeting. The consultative conference procedure was evaluated through teacher and parent questionnaires. Results indicated significant support for the conference procedure from more than 80 percent of parents and teachers. The data strongly indicated that the consultative services were perceived as highly beneficial in impacting the quality of services rendered to children with behavioral and academic problems. The positive results obtained in this pilot program have moved administrative officials to adopt the consultative conference as part of the public school system's procedure for exceptional education and on referrals from private schools. (Appendices contain parent and teacher evaluation forms, consultative conference assessment recommendation forms, the Dade County, Florida Public Schools Department of Exceptional Student Education evaluation forms, and a memorandum of commendation. Tables give information on parents' response/evaluation, teachers' response/evaluation, and a comparative analysis of services.) (Author/NB)

****
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
****

ED283064

PRACTICUM REPORT

Center for the
Advancement of Education
Ed.D. Program

A Plan to Improve Psychological Services from the Public School System to the Private School Sector

by

Gil Lopez

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

☑ This document has been reproduced as received from the person or organization originating it.

☐ Minor changes have been made to improve reproduction quality.

• Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.

"PERMISSION TO REPRODUCE THIS MATERIAL HAS BEEN GRANTED BY
Gil Lopez

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)."

CG 019953

3301 College Avenue
Fort Lauderdale, Florida 33314
305/475-7300

NOVA UNIVERSITY

BEST COPY AVAILABLE

DEC 23 1986

A Plan to Improve Psychological Services from the Public School System to the Private School Sector

by

Gil Lopez

Cluster 16

Practicum II
Presented to the Ed. D. Program
in Early Childhood in partial
fulfillment of the requirements
for the degree of Doctorate of Education

Nova University

1986

PRACTICUM APPROVAL SHEET

This practicum took place as described.

Verifier:

Susan Renick Susan Renick
Name

Exceptional Student Education Director
Title

Dade County Schools North Central Area
Address

1080 La Baron Dr.

Miami Springs, FL 33162

11-1-86
Date

This practicum report was submitted by Gil Lopez, under the direction of the reviewer listed below. It was submitted to the Ed.D. Program in Early Childhood and approved in partial fulfillment of the requirements for the degree of Doctor of Education in Early Childhood at Nova University.

Approved:

12-15-86
Date of Final Approval of Report

Polly W. Peterson, Ph.D.
Polly W. Peterson, Ph.D.

Acknowledgements

To my wife Maria Elena, for the tremendous emotional and spiritual support she provided me throughout this practicum.

To my children Kristin and David for putting up with my anxieties.

To God, the Father, the Omnipotent, for giving me the strength and endurance to complete it.

Abstract

A Plan to Improve Psychological Services from the Public School System to the Private School Sector. Lopez, Gil, 1986: Practicum II Report, Cluster 16 - Florida, Nova University Ed.D. Program in Early Childhood Descriptors: Psychological Referrals/Child Study Teams/Exceptional Student Education/Psychological Services.

This practicum was designed to improve the quality of psychological referrals from private schools to the Public School System by establishing a consultative conference procedure. The primary purpose of the conference was to establish open communication between teachers and the school psychologist and to provide more immediate psychoeducational alternatives for teachers to implement in the classroom. Consultative services hence became available to all cases regardless of eligibility for psychoeducational testing.

A year long program was established wherein each referral went through the consultative conference procedure with teachers from the referring private school, parents and school psychologist present at the meeting. The consultative conference procedure was evaluated through teacher and parent questionnaires. Results indicated significant support for the conference procedure from more that 80 percent of parents and teachers.

The data strongly indicated that the consultative services were perceived as highly beneficial in impacting the quality of services rendered to children with behavioral and academic problems. The positive results obtained in this pilot program have moved administrative officials to adopt the consultative conference as part of the Public School System's procedure for exceptional education and on referrals from private schools.

For further information contact:

Gil Lopez
1314 S.W. 136th Place
Miami, FL 33184

TABLE OF CONTENTS

Page

TITLE PAGE..... 1

PRACTICUM APPROVAL SHEET..... 2

ACKNOWLEDGEMENTS.....iii

ABSTRACT..... iv

TABLE OF CONTENTS..... v

Chapter

I INTRODUCTION 7

Author's Work Setting..... 7
Author's Role and Responsibilities..... 8

II STUDY OF THE PROBLEM..... 11

Description of the Problem..... 11
Evidence of the Problem..... 13
Causes of the Problem..... 14
Relation of the Problem to the Literature.... 15

III ANTICIPATING OUTCOMES AND EVALUATION INSTRUMENTS 19

Statement of General Goals..... 19
Behavior Expected and Standards
of Performance..... 19
Other Possible Outcomes..... 20
Evaluation Instrument and Plans
for Analysis of Data..... 21

IV SOLUTION STRATEGY..... 23

Discussion and Evaluations of
Possible Solutions..... 23
Designated Solutions..... 25

V RESULTS, CONCLUSIONS AND RECOMMENDATIONS..... 30

Presentation and Analysis of Results..... 30
Conclusions and Recommendations..... 38
Dissemination..... 41

Page

REFERENCES..... 43

Appendixes

A: PARENTS' AND TEACHERS' EVALUATION FORMS..... 45

B: CONSULTATIVE CONFERENCE ASSESSMENT RECOMMENDATION FORMS..... 50

C: DADE COUNTY PUBLIC SCHOOLS DEPARTMENT OF EXCEPTIONAL STUDENT EDUCATION EVALUATION FORMS..... 53

D: MEMORANDUM..... 64

List of Tables

1 PARENTS' RESPONSE/EVALUATION..... 30

2 TEACHERS' RESPONSE/EVALUATION..... 34

3 COMPARATIVE ANALYSIS OF SERVICES..... 37

Chapter I

Introduction

Author's Work Setting

The Public School System selected for this study serves a population of approximately 240,000 students. At the end of 1983, these students were enrolled in 250 elementary and secondary schools, half of which were operating with a student enrollment that exceeded the assigned capacity. The effects of various waves of immigrants from Central and South America had increased enrollment figures in the public schools beyond those projected by the County Planning Department in 1982. For the purpose of administration, the system is divided into four areas: South, South Central, North and North Central with superintendents and directors assigned to each area.

The school system in question represents 27 municipalities and the unincorporated sections that comprise the County. An elected school board is responsible for policy making and administration of the second largest budget in the state. During the 1984-85 school year the budget included $770 million for daily operations and $215 million for the construction of new schools. Seven new schools were planned for 1985-86 as well as continued restoration of existing sites.

The geographical area selected for the implementation of this practicum, serves approximately one fourth of the County population. The socio-economic composition of the area is characteristic of low

middle- class neighborhoods that is relatively uniform throughout the section. The ethnic composition consists of 39 percent Hispanic, 32 percent Black and 28 percent White Anglo creating a multicultural community with a wide variety of special challenges. Most parents in the area work in nearby factories and many of Hispanic origin remain monolingual which frequently creates difficulties in communicating with some school personnel. The geographical area contains 46 elementary schools, 11 junior high schools and 6 senior high schools.

The private schools located in the geographical area consist of parochial schools and smaller private schools owned by Hispanics living in the area. With a strong cultural bias towards private and parochial education, many Hispanic families enroll their children in these schools, which generally lack the special programs in exceptional education regularly available in the public schools. Very often, students presenting learning and/or behavioral problems cannot be adequately identified or serviced through the private school facilities.

Author's Role and Responsibilities

The State where the school system herein described is located and the United States Government mandate that each school district in the State provide a comprehensive program for all exceptional children. An exceptional student is any child or youth enrolled in the public or private school sector of a district who requires special instruction

or related services to take full advantage of or respond to educational programs because of a physical, mental or emotional, social or learning exceptionality (Public Law 94.142 and County Procedures Manual 1985).

The Exceptional Student Education Program in the county furnishes educational programs which are individually designed to provide educational benefits to handicapped children. The County is presently providing special education programs and services for eligible children in the following areas: hearing impaired, visually impaired, physically impaired (including physical therapy), trainable and educable mentally handicapped, emotionally handicapped, specific learning disabled, gifted, speech impaired, homebound/hospitalized and profoundly handicapped, which included autistic, deaf-blind, profoundly mentally handicapped and severely emotionally disturbed.

Exceptional student education is an integral part of the total school system. Its goal is to appropriately place students through screening, referral, identification and placement in programs. It provides specialized teaching techniques, equipment, materials and an environment where each exceptional child can achieve his/her maximum potential.

The Exceptional Student Program is under the umbrella of Student Services. The Program is administered by three County-wide executive directors, who are responsible for program development, program

services and alternative program operations. There are County supervisors for each exceptionality. Direct services to the students are managed by four area directors, one for each of the four administrative areas of the County schools. Each area director is responsible for the special education program of the schools in his/her area.

The geographical area selected for this study is staffed by 18 psychologists, including a chairman, who deliver services to the area's schools. Each psychologist is assigned to four schools and is directly responsible for all psychological evaluations of those schools. In addition, psychologists are responsible for serving referrals that are initiated in the private school sector.

The writer is a school psychologist in the above mentioned school system area. The major responsibilities of this position are to administer complete psychoeducational evaluations to diagnose learning and behavioral problems, provide recommendations and indicate need for placement in special programs when necessary, conduct consultative conferences with teachers and principals and serve on various school-based teams making placement decisions and providing support services to teachers.

Chapter II

Study of the Problem

Description of the Problem

Referrals of children to psychological services for psychoeducational battery were initiated by the teacher. For the purpose of screening cases and attempting preliminary remediation strategies, the public schools regularly conducted Child Study teams where cases were presented to a psychologist, teachers and school principal for preliminary discussion and assessment of the case. These conferences served to determine the presenting problem, whether the case would be appropriate for testing and provided preliminary remediation to be implemented by the teacher. This procedure served a supportive function to the teacher dealing with the problem situation and established a cooperative working relationship with the school psychologist who started gathering information about the case. This early involvement served to sensitize the psychologist as to the possible needs of the child in case that an evaluation would be in order.

Private schools followed a different procedures. Children who presented a variety of learning and/or behavioral problems were referred for psychoeducational testing to the Public Schools District Area where the school belonged. Teachers initiating referrals filled out a printed form indicating the problem(s) presented by the child.

Generally, parents presented this form to the area office to request testing (see Appendix A). Testing would be performed, a conference held; and, at this point, some decisions would be reached, generally without the direct input of the classroom teacher.

Without direct communication with the teacher several weaknesses occurred in the procedure:

1. No opportunity for preliminary intervention existed which excluded this important data from the process and limited the supportive consultative services that were due to the teachers.

2. Written information was different in quantity and quality to information obtained through a structured personal interaction such as that provided by Child Study Teams. This resulted in unclear or insufficient presentation of the problem.

3. School psychologists performing the testing had to rely solely on input from parents about what went on in the school. Most parents had insufficient knowledge or objectivity to help the psychologist in his/her assessment.

Besides the effect this poor procedure had on the professionals serving the child, it was questionable whether children served in this manner were receiving the full benefits that could otherwise be available with full participation from the home school.

The problems addressed in this practicum were the existing lack of communication between the private school teacher and school psychologist, and the limited services available to the teachers and

children from private schools resulting in poor exceptional education interventions and programming for this population. This situation ultimately affected in a negative way the academic development of children with a variety of learning and/or behavioral procedures.

Evidence of the Problem

During the 1983-84 school year, 52 cases were referred for testing from the private school sector in the school area in question. Of these cases, all were referred for a full psychoeducational battery without previous assessment or consultation as to the appropriateness of the case for such procedure. Typically, public school cases were screened through the Child Study Team structured at each school.

Out of 52 cases opened during that time, close to 30 percent or 14 cases were still waiting to be evaluated when this study was conducted. The average waiting time for an evaluation appeared to be six months. This waiting period was comparable to that of public school cases, however, teachers in the private sector lacked the consultative support of the psychologist during this time.

In terms of cases meeting criteria for exceptional education it was found that of 30 cases tested and staffed, 13 or close to 50 percent failed to meet such criteria.

Upon reviewing records indicating teacher attendance at staffing for cases referred during the 1984 academic year it was found that the total number attending such meetings was zero for the private schools.

Causes of the Problem

As the author assessed the causes that have perpetuated such an unsatisfactory relationship with the private school sector, a few things seemed to deserve mention.

First, that teachers' schedules were generally rigorous, limiting the flexibility that they may have to attend meetings as the ones that have been previously mentioned in this chapter. School administration had also been reluctant to offer extra pay for teachers to perform such tasks and/or provide the substitute coverage that would have facilitated teacher attendance and participation. It was felt that these factors had popularized the use of the written form as it minimized time and involvement in such procedures.

Secondly, private schools were generally unaware regarding procedures and exceptional education programs that could be of service to their students. As a result, public school procedures were perceived as a burden rather than a real help to their school in serving exceptional children.

Finally, because of physical distance and minimal communication between the schools and district areas, conferences between psychologists and home school teachers were perceived as difficult to conduct. This had served to perpetuate the existing gap and encouraged continuation of the simplest (written) input from the home school.

Neither the public schools nor the private ones have been aggressive in proposing an alternative. A reluctant acceptance of the existing procedure had been the rule from both sides.

Relation of the Problem to the Literature

Research literature was found to address a variety of issues involved in professional teams making referral and placement decisions for children in exceptional education.

In a study undertaken by Ysseldyke and Algozzine (1981) the decision-making process used by the school diagnosticians was evaluated in terms of its accuracy in identifying students for special education. These investigations found that referral information is crucial for the decision making process of professionals rendering services for a particular child.

The effectiveness of team decision making versus that of individual professionals was assessed by Pfeiffer (1980, 1982) who found that teams generated significantly less variability in making special education placement decisions than did the same specialists acting independently. Frame (1982) also indicates that professionals tend to agree on diagnosis regarding learning and behavioral problems but that there seems to be a larger discrepancy when it comes to prescriptions and recommendations. Both of these studies appear to support the full participation of professionals servicing children in order to improve the quality of placement and prescriptive decisions.

In the assessment process of cases presenting a combination of complex characteristics, Johnson (1980) found that the decision-making process became less predictable and the recommendations often difficult to explain. In cases where the teacher, who ultimately implements the recommendations, is absent from the decision-making process, remediation efforts may be seriously hampered by minimal communication between professionals.

There seems to be agreement on characteristics that are considered important by teachers and psychologists in making referral and placement decisions for children in exceptional education. In a study by Matuszek (1979), 76 teachers and 53 psychologists were asked to rate 16 variables. Results indicated that both groups consider I.Q. test achievement, class achievement and home-related anxiety important in making recommendations. It may be noted that some of these variables fall in the domain of teachers/psychologists, again indicating a strong need for communications and cooperation between them.

Ysseldyke et al. (1982) conducted an observational analysis of 34 special education team meetings finding that these tended to be unstructured, non-goal-oriented and limited to the extent in which individuals participated in decision making. In two other studies undertaken by Mehan et al. (1981, 1982) it was found that district level placement committees are generally organized to implement

standard practices rather than make systematic decisions using a full range of alternatives. These investigators also indicated that most decisions tend to be presented and accepted rather than challenged and explored.

Stewart-Lester (1982) found that consultation between the psychologist and teacher before referral often resulted in elimination of unnecessary testing. Consultation often allowed the teacher to determine when students were unlikely to qualify for special class placement, and to discuss alternatives to referral when testing would not be appropriate for the case.

It was also suggested by Cummings (1982) that Child Study Teams should develop alternative educational plans for referred students who are ineligible for testing and/or special education. This service would be supportive to the regular classroom teacher who would be responsible for implementing the plan.

Finally, in a study conducted by Christenson and Ysseldyke (1982) teachers reported that institutional constrains and external pressures influenced their referral decisions. Over one third of teachers mentioned length of time between referral and evaluation and many others indicated inadequate inservice and/or opportunities to become familiar with behaviors indicative of a need for referral.

In summary, research generally revealed that consultation and a cooperative relationship between psychologists and teachers enhanced

the quality of diagnostic and prescriptive decision for children and reduced unnecessary testing in cases where such procedures are inappropriate or unnecessary in serving the needs of a particular child.

Chapter III

Anticipated Outcomes and Evaluation Instruments

Statement of General Goals

The following goals were projected for this practicum:

1. To provide consultation opportunities for private school personnel who served students with learning and behavioral problems.

2. To reduce unnecessary testing, thus increasing the percentage of cases tested that meet criteria for exceptional education.

Behavior Expected, Standards of Performance, and Evaluation Instruments:

Expected Behavior	Assessment Instruments	Standard of Performance
Teachers and parents will indicate satisfaction with consultative conference in terms of providing sound educational strategies to meet the needs of the child.	A questionnaire developed by the author to assess the effectiveness of consultative conference.	80% of teachers and parents will indicate satisfaction with the outcomes of the consultative conference by answering in a positive direction to 80% of items.

The number of unnecessary evaluations will be reduced thus increasing the percentage of cases that meet criteria for exceptional education when tested.	Keep records as to disposition of the case and its reasons at the end of the consultative conference.	Reduce Evaluations by 15%.

Other Possible Outcomes

As a result of the consultative conference procedure it was expected that communication channels would be firmly established with the private schools referring cases. The availability of support services to the private schools, it was felt, would promote more teacher-initiated referrals to be serviced through the area office. Whereas this could create a larger case load in some respects, the consultative procedure would also impact the quality of referrals obtained.

Knowledge of community resource agencies and private practitioners serving children would also become important to the psychologist conducting conferences. As cases would be assessed, it would become necessary to channel some of these to community resources where more appropriate services (besides testing) could be provided.

A final possible outcome was expected in increased home and school participation in staffings where placement discussions were made for children meeting criteria for exceptional education. Participation in such meetings by teachers and/or private school personnel was zero at the beginning of this project.

Evaluation Instruments and Plans for Analysis of Data

The evaluation instrument used for this practicum consisted of an author developed questionnaire designed to assess the effectiveness of the consultative conference and a form serving to document each case presented in this report.

The consultative conference questionnaire consisted of 12 items to be answered by indicating agreement/disagreement or uncertainty regarding a given statement. Items were geared to assess the effectiveness of the conference in terms of perceived benefit regarding direct teacher participation, providing alternative strategies to be implemented in the classroom, gaining a clearer understanding about the problem faced by the child, adequacy of recommendations, etc. For a closer examination of item content please see assessment questionnaire (Appendix A). Two forms were available; one to be filled out by teachers and one for parents. Item content remained similar in both questionnaires. The instruments were filled out anonymously at the end of each conference and results examined after gathering the data over a period of nine months.

Another form was filled out by the psychologist at the end of the conference to document the presenting problem, disposition of the case and recommendations made. Information was also kept on this form indicating date case was opened, tested, teacher participation at staffing and whether criteria was met for exceptional student education. For more information see Appendix B.

The data collected in this practicum were analyzed according to the standards of performance outlined in the second section of this chapter. Individual item analysis was conducted for each item in the evaluation instruments. In the first instrument given to parents and teachers, numbers and type of responses to items were converted to percentages and reported in table form.

The data gathered from cases assessed through this practicum was pooled in terms of recommendations provided for each case, percentage of cases meeting exceptional education criteria and participation of teachers and other private school personnel at staffings. These results are also presented in table format.

Chapter IV

Solution Strategy

Discussion and Evaluations of Possible Solutions

Since the passing of Public Law 94.142, all children became eligible to public education and services provided by the Public School System. This meant that children attending private and/or parochial schools were eligible to the services provided by psychologists and exceptional student education in the public system.

Since the passing of Public Law 94.142 in 1975, which expanded exceptional education programs, the procedure followed by the private schools for the assessment and placement of children into these programs has been operating without scrutiny.

The County Public School System had continued to face the problem of excessive referrals in recent years. The long waiting period often put a strain on compliance with Public Law 94.142. In 1984, the School Board contracted 1,038 cases with an outside agency and with school psychologists during nonworking hours. Other measures were taken during 1985, including a change in re-evaluation procedures after a three-year period, which eliminated unnecessary testing. In addition, the concept of Child Study Teams in each school was strengthened, in order to reduce the number of unnecessary testings and provide support services to teachers serving students with difficulties.

The private school sector, however, remained untouched by some of the measures taken by the public schools to meet the needs of exceptional children. Their needs for assessment and placement continue to be substantial requiring a minimum of one full-time school psychologist in each area to handle their yearly case load.

Since teachers are the primary initiators of referrals (Christensen, 1982), it seemed appropriate to work closely with them in making assessment and placement decisions for children attending private schools. The inclusion of teachers in the decision-making team has been extensively supported in the literature (Algozzine, 1982; Pfeiffer, 1982, 1980; and Frame, 1982). Consultation between psychologists and teachers has also resulted in the elimination of unnecessary testing as documented by Stewart-Lester (1982).

The current practicum proposed to institute a consultative conference between school psychologists conducting assessment and placement services in the public schools, and teachers and parents referring students from the private school sector.

Attempts had been made to remedy the existing situation. Often, school psychologists contacted the referring teacher via telephone. Communication was occasionally successful but occurred erratically and excluded the teacher from the actual decision making process. The author of this practicum considered formalizing communication with the

teacher as a step in the procedure of evaluating a child, however, it was felt that teachers' schedules would usually make this step difficult.

Another alternative was considered, and this consisted of obtaining written input from teachers through a behavioral observation form that could be evaluated along with other observations and testing data. The idea of personal interaction still persisted as including a quality of contact not available through written or telephone methods of communication.

The possibility of assigning one school psychologist per area to the private school sector seemed ideal. In this manner, the school psychologist could observe and interact with the teacher in the home school grounds. This possibility was presented to the director of exceptional education in the area and was rejected on the basis of limited personnel and the existing waiting list from area schools.

The solution selected for this practicum seemed to be most appropriate in addressing the existing problem and also being administratively feasible.

Designated Solution

The proposed solution for the problem addressed in this practicum consisted of instituting a consultative conference designed to create a meeting ground for full communication and cooperation between school

psychologists conducting assessment and placement in public schools for exceptional education students and teachers in the private sector serving this population.

Teachers in private schools would then be participating more fully in the decision-making process and availing themselves of consultative services that would provide the needed support to serve students with learning and/or behavioral difficulties.

Consultative conferences hence would become a new, creative procedure instituted by the public schools to enhance the delivery of exceptional student education services to the private school sector. Such conferences were structured through the particular school area and served as a pilot program for possible future implementation on a county-wide basis.

The proposed procedure was initiated when the school or, most often, the parent would contact psychological services for an assessment and possible placement of a child with exceptional education. Such contact was generally initiated by telephone, at which time, an appointment was issued for a consultative conference. At this time, the initiating party was informed that the parents, as well as the teacher, would be asked to attend a preliminary conference with the school psychologist. Appointments were given on Friday afternoons between 1:00 and 4:00 p.m. and lasted approximately 45 minutes to 1 hour. A behavioral observation form was filled out by

the teacher prior to the conference and presented at this time along with other referral forms filled out by parents (see Appendix C).

In some instances, principals from private schools complained and refused to release their teachers. Consequently, the psychologist had to contact (via phone) each of those school principals and explain the purpose and benefits of the consultative conference. Such procedure helped clarify any misunderstandings about the conference and helped in releasing teachers early to attend the conference.

It was felt that many private schools welcomed the procedure while others found it an unnecessary demand that created scheduling inconveniences for the home school, especially in releasing teachers during school hours. Although every attempt was made to facilitate appointment times for the conference, definite time limitations existed as to when these could take place.

In general, it can be said that many schools were receptive and support increased once teachers were exposed to the procedure. As with any new procedure, resistance was expected and considered part of the natural process of this change.

The goals of the conference were as follows:

1. To determine the presenting problem of the child being referred.

2. To disseminate information about criteria for placement into exceptional student education.

3. To determine and present appropriate psychoeducational recommendations to teachers and parents.

4. To assess parent and teacher satisfaction with the consultative procedure on the various aspects of the conference.

At the end of the conference a survey was administered to teachers and parents and a form filled out by the psychologist to document the presenting problem, recommendations provided and follow-up data (see instruments, Appendices A and B).

Permission to institute the consultative conference was obtained from the Area Director of Exceptional Education and physical space was secured at the Area Teacher Education Center. The facilities consisted of a conference room equipped with a conference table, eight chairs and a blackboard, which were sufficient to conduct the conferences appropriately.

The starting date for this procedure was October 1985. The conferences continued through June 1986, at which time, the data were analyzed, evaluated and recommendations made to the area and county directors.

Groundwork for dissemination of the results of this practicum was initiated during the beginning stages of this practicum. The author met on two occasions with the County Director of Exceptional Education and the County Supervisor for Psychological Services who were supportive of the proposed solution. County-wide recommendations for institution of consultative conferences would be made at the conclusion of this practicum.

Some difficulties were encountered in engaging the support of other staff involved in the assessment and placement of students. It is felt that this was the result of lack of clarity as to the goals and purposes of the consultative conference procedure. Many members of the staff expressed apprehension at the apparent expansion of services to the private sector without enlisting the help of additional personnel.

Chapter V

Results, Conclusions and Recommendations

Presentation and Analysis of Results

Findings gathered in the evaluative phase of this practicum indicate a very positive response towards the consultative conference procedure on the part of both parents and teachers. Parents seemed to feel strongest about having teachers present in the diagnostic process of their child indicating a preference for a personal conference over submitted written material.

Parents' confidence in the teacher's ability to manage their child's problem in the home school also seemed to be strengthened by teacher participation in the consultative conference.

Table 1 shows each of the items included in the parent questionnaire, the number of parents who responded positively to the items and the percentage of positive responses based on the number of participants.

Table 1

Consultative Conference Evaluation

Parents' Response

	No. of Positive Responses	Total No. of Respondents	Total Positive Response Percentage
1. It is beneficial for my child if the teacher from his/her school can communicate directly with the psychologist evaluating him/her.	17	18	94

Table 1 (continued)

	No. of Positive Responses	Total No. of Respondents	Total Positive Response Percentage
2. I feel that the teacher's input will more clearly present the problems my child is currently facing in school.	16	18	88
3. It is better for the teachers to have a personal conference than to submit observations in writing to the psychologist.	17	18	94
4. The home school was supportive in helping us seek services for our child.	15	18	83
5. I have gained information that will enable me to better help my child with the problem he/she is facing.	16	18	88
6. As a result of discussing my child with professionals I have clearer understanding about the problem he/she faces.	15	18	83
7. I feel that this conference was helpful in servicing the interests of my child.	16	18	88
8. The participation of my child's teacher will be helpful to my child in this school.	17	18	94

Table 1 (continued)

	No. of Positive Responses	Total No. of Respondents	Total Positive Response Percentage
9. I feel that the needs of my child were adequately perceived by the psychologist.	16	18	88
10. I am satisfied with the outcomes of this conference.	17	18	94
11. I feel that the recommendations made by the psychologist were appropriate for my child.	17	18	94
12. This conference was helpful in understanding services that are available to my child.	17	18	94

Out of 18 participants, 17 or 94 percent of the parents felt that it was beneficial for the teacher to communicate directly with the school psychologist, and preferred direct, personal communication over written material. These parents also perceived the teacher as more capable of helping their child as a result of the teacher's direct, personal participation in the decision-making process.

The consultative conference appeared to have beneficial aspects for the parents also, as 88 percent of the participants reported

having gained information that would better equip them in helping their child, while 94 percent indicated having a clearer understanding of their child's problem.

Satisfaction with the conference process and the appropriateness of recommendations made, was reported by 94 percent of the parents.

Information about exceptional education services was also disseminated through the conference as 94 percent of parents reported knowing more about service options available to their child. Home schools were perceived as supportive of parents in seeking services as indicated by 83 percent of the participants.

In summary, analysis of parent responses indicate that the 12 items addressed in the questionnaire were answered in a positive direction beyond the estated criteria of 80 percent. With a total of 18 participants, the minimum number of positive responses obtained was 15 or 83 percent.

Teacher responses were strongly recorded in a positive direction, indicating a very clear support of the consultative conference.

Table 2 shows the manner in which teachers responded to items in the questionnaire. Total number of teachers responding was 18 and the number of teachers responding positively to each item is recorded next to the item with a separate column, indicating positive response percentage.

Table 2

Consultative Conference Evaluation

Teachers' Response

	No. of Positive Responses	Total No. of Respondents	Total Positive Response Percentage
1. It is beneficial for children served by the home school to have a direct communication with the psychologist evaluating the child.	16	18	88
2. I feel that my input as the child's teacher will more clearly present the case to the psychologist.	17	18	94
3. It is clearer to give my input in a direct, verbal fashion rather than in written form.	17	18	94
4. My home school was supportive in my participation in seeking services for this child.	17	18	94
5. I have gained information that will be helpful to me in the classroom in helping this child.	13	18	72

Table 2 (continued)

	No. of Positive Responses	Total No. of Respondents	Total Positive Response Percentage
6. As a result of discussing the case with other professionals, I now have a clearer understanding about the problem faced by this child.	15	18	83
7. I feel that this conference was helpful in servicing the interests of this child.	17	18	94
8. I would recommend participation in this type of conference to other teachers.	17	18	94
9. I feel that the needs of the child were adequately perceived by psychologist.	17	18	94
10. I am satisfied with the outcomes of this conference.	16	18	88
11. I feel that the recommendations made by the psychologist were appropriate.	17	18	94
12. This conference was helpful in understanding services available to children with problems.	17	18	94

Ninety four percent of the teachers reinforced the value of direct participation over written forms and its impact in clearly presenting the problem to the psychologist.

In terms of benefits derived from the conference, 94 percent felt that the procedure was beneficial in servicing the interest of the child, 83 percent reported having a clearer understanding of the problem and, 72 percent indicated that they had gained valuable information to help the child in the classroom. Overall satisfaction of the procedure was reported by 88 percent of the teachers and 94 percent indicated that they would recommend participation in the conference to other teachers. The conference was also successful in disseminating information about exceptional student services as indicated by agreement to this item by 94 percent of the respondents.

The teachers questionnaire, also, looked at teachers' perceptions about the assessment and recommendations made by the psychologist. Ninety four percent of the teachers felt that the psychologist adequately perceived the needs of the child and the same percentage felt that the recommendations made were appropriate.

Finally, teachers reported feeling supported 94 percent by their home school to participate in the consultative conference, indicating a willingness on the part of private school to attempt a new procedure for handling referrals.

Other objectives for this practicum were to increase the percentage of cases meeting exceptional education criteria after testing and to reduce the number of unnecessary evaluations by 15 percent.

Table 3 presents a comparative analysis of services provided to cases referred from private schools during the 1984-85 and 1985-86 school years.

Table 3

Comparative Analysis of Services Provided to Cases Referred From Private Schools During 1984-1985 and 1985-1986

	Before Procedures		During Procedures	
	1984-1985	Percentage	1985-1986	Percentage
Total number of cases who initiated contact to receive psychological services in the public schools.	52		30	
Cases who decided to withdraw after making initial contact	Data no available for case withdrawal		12	40
Cases tested.	30	57	7	23
Cases meeting criteria in Exceptional Education after testing.	17	56	6	85
Cases receiving psychoeducational consultation immediately after referral.	0	0	18	60

The percentage of cases tested that later met exceptional education criteria was increased by 29 percent from 84-85 to 85-86. Actual percentage of cases tested was reduced by 34 percent thus meeting both of the previously mentioned objectives.

It may be noted that the number of cases referred decreased from 52 during 1984-85 to 30 during the year when the consultative procedure was implemented. Thirteen cases or approximately 30 percent decided to withdraw from the process after making initial contact. Parents were contacted via phone to inquire about the reason/s for withdrawal and the following comments were noted:

1. Parents had re-considered and did not want records kept for their child in the public school system.
2. The private school would not release teachers for the conference.
3. Parents had decided to go through a private psychologist whom they could approach on demand.

Although data for the percentage of cases withdrawing after making initial contact is not available for previous years, it is felt that the reasons sited were typical of those parents who generally withdraw.

Conclusion and Recommendations

A most important result of this practicum is that private school cases were able to receive consulting services upon initiating a referral through the consultative conference procedure. During the

1984-85 school year, after an average of six months waiting period, referrals had not yet received any assistance in addressing the problems of the child within the classroom setting, even if they would receive a full psychoeducational evaluation at a later date. In contrast, through the use of the consultative conference procedure 60 percent or 18 cases seeking psychological services in the public schools received consultation with psychologists within a two week period after initiating contact (see Table 3) regardless of their eligibility for psychoeducational testing.

This result is most positive in terms of the implications it has for the student's progress and for the teacher-student relationship. Most frequently a teacher tries different alternatives before encouraging parents to seek outside help. Plainly stated, as the teacher has to deal with the difficulties of a particular student, the student-teacher relationship becomes difficult for both. The child typically complains of the teacher being unfair, too difficult, and the teacher generally feels frustrated in her attempts to help. In the past, even if a referral was initiated, the student would generally not be with the referring teacher when the time for the evaluation would finally arrive. In these cases, the opportunity for positive interventions and lower frustration levels was usually lost resulting in loss of interest in school and a lowered self-concept for the child. By availing consulting services to teachers

shortly after a referral is made the teacher-student experience can be significantly impacted in a positive direction by giving alternatives before the all too common "nothing works" attitude sets in and goes down in the school history of a child.

In summary, the use of the consultative conference procedures appears to be significantly and strongly supported by the information gathered in the evaluation phase of this practicum. As discussed, this procedure offers a positive alternative to the usually long waiting periods that typically take place when parents or teachers seek a psychoeducational evaluation through public school systems.

Recommendations, based on the experiences obtained during the implementation year of this practicum, include:

1. An initial workshop in the work setting would be helpful in order to engage the support of staff. The goals of the workshop should include classification of purpose, actual explanation of the procedure and an open question answer period to allow ventilation of any resistance or doubt about the project.

2. An area wide workshop should be implemented with private school principals, to describe the procedure and present its valuable aspects for the private home school teachers and children.

3. More flexible hours should be provided for the conference in order to accommodate teacher schedules whenever possible.

4. Conducting the conferences in private schools on a rotating basis may bring a closer working relationship and draw support for the procedure.

5. Cases that withdrew because of lack of support from the private school should be followed up by calling school principals and attempting to enlist their support in servicing the case.

The major goal of the mentioned recommendations is to pursue a supportive environment for the program. Principals may regard the conference procedure as an added demand that would be intrusive into teachers schedules and responsibilities. By allowing principals to understand the purpose of the procedure, support would be undoubtedly gained. The same principle applies to drawing support within the work environment as staff also feel threatened by the possible work demands brought about by a procedure change. In summary, the recommendations stated herein refer greatly to groundwork to be done before launching the project, as this would save much time and effort in the implementation phase and would insure greater cooperation for the project.

Dissemination

Results of this pilot program have been presented to the Public Schools Area and District Office and efforts are being coordinated to implement this practice on a county-wide basis. A memo from the Area

Exceptional Education Director was received expressing much satisfaction with the consultative conference procedure and the administration's desire to continue and expand this service. (See Appendix D). The author of this practicum has been asked to serve as area coordinator of this procedure and in-service workshops are currently being planned for exceptional education staff in the other three areas comprising the County School System.

The use of consultative conferences as a first step for families seeking psycho-educational services for their children is a new concept. It is felt, however, that it finds support by promoters of the use of team decision making in the schools like Pfeiffer (1980-1982) and France (1982). Involving teachers in the referral process was not only substantiated as a positive alternative by the teachers in this practicum but has also been addressed through studies conducted by Ysseldyke and Algozzine (1981) and Matuszek (1979).

Results of this practicum have been made available to private schools, colleagues and professionals in the education field and to private agencies rendering psychoeducational services in the community

References

Algozzine, B. & Ysseldyke, J. E. (1981). Special education services for normal students: Better safe than sorry, Exceptional Children, 48, 238-243.

Christensen, S., Ysseldyke, & Algozzine, B. (1982). Institutional constraints and external pressures influencing referral decisions. Psychology in the Schools, 19, 341-345.

Cummings, J. (1983). The Alternate Educational Plan (AED). School Psychology Review, vii, 336-337.

Dade County Public Schools (1984). Procedure Manual for Providing Special Education for Exceptional Students, DCPS Report, Miami, Florida.

Dade County Public Schools (1983). Public Information Office, De-Segregation Plan, DCPS Report, Miami, Florida.

Dade County Public Schools (1984). Exceptional Student Education Operations, DCPS Report, Miami, Florida.

Frame, R. E. et al. (1982). Interclinician agreement and bias in school psychologists' diagnostic and treatment recommendation for a learning disabled child. Psychology in the Schools, 19, 319-327.

Johnson, V. M. (1980). Analysis of factors influencing special educational placement decisions. Journal of School Psychology, 18, 191-202.

Matuszek, P., Oakland & Thomas (1979). Factors influencing teachers and psychologists' recommendations regarding special class placement. Journal of School Psychology, 17, 116-125.

Mehan, H. (1981, August). The role of language and the language of role in practical decision making. Paper presented at the Annual Meeting of the American Sociological Association, August 1981. Toronto, Ontario, Canada.

Mehan, H., et al (1981). Educational decision making in students' careers final report. National Institute of Education Research Report, Washington, D.C.

Metropolitan Dade County. Metropolitan Planning Department, (1982) Comprehensive Development Master Plan, MDC Report, Miami, Florida.

Metropolitan Dade County, Metropolitan Planning Deparmtnet, Research Division, (1980) Census of Population and Housing, Miami, Florida.

Pfeiffer, S. (1982). Special education placement decisions made by teams and individuals: A cross-cultural perspective. Psychology in the Schools, 19, 335-340.

Pfeiffer, S. (1980). The influence of diagnostic labeling on special education placement decisions. Psychology in the Schools, 17, 346-350.

Stewart-Lester, K. (1982). Consultation opportunities for school psychologists: A service delivery model. Psychology in the Schools, 19, 86-91.

Ysseldyke, J. E. et al (1982). Special education team decision making: An analysis of current practice. Personnel and Guidance Journal, 60, 308-313.

APPENDIX A

Consultative Conference Evaluation

Parents' Form

	Agree	Uncertain	Disagree
1. It is beneficial for my child if the teacher from his/her school can communicate directly with the psychologist evaluating him/her.	17	____	____
2. I feel that the teacher's input will more clearly present the problems my child is currently facing in school.	16	1	____
3. It is more clear for the teachers to have a personal conference than to submit observations in writing to the psychologist.	17	____	____
4. The home school was supportive in helping us seek services for our child.	15	____	2
5. I have gained information that will enable me to better help my child with the problem he/she is facing.	16	1	____
6. As a result of discussing my child with professionals I have a clearer understanding about the problems he/she faces.	15	2	____
7. I feel that this conference was helpful in servicing the interests of my child.	16	1	____
8. The participation of my child's teacher will be helpful to my child in this school.	17	____	____

	Agree	Uncertain	Disagree
9. I feel that the needs of my child were adequately perceived by the psychologist.	16	1	
10. I am satisfied with the outcomes of this conference.	17		
11. I feel that the recommendations made by the psychologist were appropriate for my child.	17		
12. This conference was helpful in understanding services that are available to my child.	17		

Consultative Conference Evaluation

Teacher's Form

	Agree	Uncertain	Disagree
1. It is beneficial for children served by the home school to have direct communication with the psychologist evaluating the child.	16	1	____
2. I feel that my input as the child's teacher will more clearly present the case to the psychologist.	17	____	____
3. It is more clear to give my input in a direct, verbal fashion rather thatn in written form.	17	____	____
4. My home school was supportive in my participation in seeking services for this child.	17	____	____
5. I have gained information that will be helpful to me in the classroom in helping this child.	13	3	1
6. As a result of discussing the case with other professionals, I now have a clearer understanding about the problems faced by this child.	15	2	____
7. I feel that this conference was helpful in servicing the interests of this child.	17	____	____
8. I would recommend participation in this type of conference to other teachers.	17	____	____

	Agree	Uncertain	Disagree
9. I feel that the needs of the child were adequately perceived by the psychologist.	17	____	____
10. I am satisfied with the outcomes of this conference.	16	1	____
11. I feel that the recommendations made by the psychologist were appropriate.	17	____	____

12. This conference was helpful in understanding services available to children with problems.
Comments: Yes, unaware of this program earlier / I was informed of parental guidance programs / the family will be contacting the local agency and counceling / I received excellent tips-suggestions / A positive conference that I will highly recommend.
I would like to see changes in: The child's attitude toward school work / location of conferences / be held at the nearest school.

APPENDIX B

Consultative Conference Report

Name: _____ Grade: _____

Teacher: _____ Home School: _____

Date of Conference: _____

Presenting Problem:

Learning Deficit ____ _____
____

Behavioral Problems ____ _____
____

Speech & Language Problems ____ _____
____ _____
_____
_____
_____

Proposed Recommendations:

_____ Pshychoeducational Testing _____

_____ Tutor _____

_____ Speech & Language _____

_____ Counseling _____

_____ Neurological Consultation _____

_____ Medication Consultation _____

_____ Alternative Educational Placement _____

_____ Learning Disabilities Classes at Home School _____

_____ Other _____

Recommendations for classroom implementation: _____

_____

Follow Up:

	Yes	No	
Recommendations Followed	_____	_____	Comments: _____

_____

Academic Performance ____ Improved ____ Stable ____ Deteriorated ____ No Change

Social Adjustment ____ Improved ____ Stable ____ Deteriorated ____ No Change

Comments: _____

_____

Additional Recommendations: _____

_____

Comments: _____

_____

Case opened: _____ Tested: _____

Criteria met for Exceptional Student Education: _____

Teacher participated in staffings: _____

APPENDIX C

DADE COUNTY PUBLIC SCHOOLS
DEPARTMENT OF EXCEPTIONAL STUDENT EDUCATION

CASE # _____

MULTI-DISCIPLINARY TEAM REPORT

☐ *Reevaluation* ☐ *Progress Report*

☐ *Initial Evaluation* ☐ *Review*

STUDENT'S NAME _____ SEX _____ D.O.B. _____ GRADE _____

ADDRESS _____ PHONE _____ ALS _____

SCHOOL _____ EXCEPTIONALITY _____

ETHNIC ORIGIN 1 2 3 4 5 PARENT OR GUARDIAN _____

DATE OF LAST EVALUATION _____ DATE OF CURRENT EVALUATION _____

• • • • • • • • • • • • • • • • •

ASSESSMENT AREA(S)	EXAMINER	DATE COMPLETED	PAGE(S)
SOCIAL HISTORY/ADAPTIVE BEHAVIOR			
PSYCHO-EDUCATIONAL			
REFERRAL INFORMATION:			
REFERRAL FORM/STRATEGIES			
VISION			
HEARING			
SPEECH/LANGUAGE			
OBSERVATIONS			
MEDICAL			
ANECDOTALS			
ATTACHMENTS			
PARENT PERMISSION (EVALUATION)			
INTENT TO CONDUCT AN EVALUATION			

878 1664

MIS 22563 Rev (11-82

55 AREA OFFICE USE
TO: _____
DATE OPENED: _____
DATE CLOSED: _____
CASE #: _____

Dade County Public Schools

Department of Exceptional Student Education

M-TEAM REFERRAL FORM
(Initial Evaluations Only)

Student's Name _____ Sex ____ DOB _____ Grade _____
Last *First* *Middle*

Address _____ Home Phone _____ STD-ID# _____
Number & Street *City* *Zip*

School _____ Ethnic Origin 1 2 3 4 5

Parent or Guardian _____ Phone _____

Referral Initiated by _____ Room # _____

Reason for Referral _____

_____

Bilingual Testing Required: ☐ Yes ☐ No (Attach test results for English proficiency.)

CHILD STUDY TEAM REPORT/STRATEGIES EMPLOYED: (State date initiated, duration and results for each strategy. A minimum of two documented parent conferences are required for learning disabled (SLD) and emotionally handicapped (EH) students. Indicate date, persons attending and outcome).

1. _____

_____

2. _____

_____

3. _____

_____

4. _____

_____

CST MEMBERS:

1. _____ 4. _____

2. _____ 5. _____

3 _____ 6. _____
PSYCHOLOGIST

_____ _____
PRINCIPAL DATE

DADE COUNTY PUBLIC SCHOOLS
DEPARTMENT OF EXCEPTIONAL STUDENT EDUCATION

NOTICE OF INTENT TO CONDUCT AN EVALUATION
PARENTAL CONSENT FOR EVALUATION

CHILD STUDY TEAM TO COMPLETE THIS SECTION

DATE _____

_____ SCHOOL _____

_____ CONTACT PERSON _____

_____ ADDRESS _____

TELEPHONE _____

Dear _____ :

Based on the referral of _____

the Dade County School System is recommending that your child, _____
be evaluated to help plan an educational program which best meets his her needs

School personnel have carefully reviewed your child's educational records, and have based the need for a referral for evaluation upon information, and recommendations received from teachers and other personnel who are familiar with your child

A Multidisciplinary Team (M-Team) of evaluation specialists, to include a specialist in school psychology, will select specific tests, reports and procedures based on your child's needs as indicated below.

_____ Intellectual ability
_____ Academic achievement
_____ Vision screening or evaluation
_____ Hearing screening or evaluation
_____ Speech screening or evaluation
_____ Language screening or evaluation
_____ Other _____
_____ Social/development history
_____ Medical evaluation
_____ Behavior observations
_____ Learning abilities
_____ Anecdotal records
_____ Records from other agencies

An explanation of the results of the evaluation will be provided to you upon request

Both federal and state regulations require that you be informed of your rights in this matter These rights are described for you in the Procedural Safeguards printed on the back of this page Please read this form carefully before you sign and return the consent form.

Please feel free to contact the representative named above if you have any questions

PARENTS TO COMPLETE THIS SECTION

PARENTAL CONSENT FORM FOR EVALUATION

Dear _____

I am in receipt of the Notice of Intent to Conduct an Evaluation for my child, _____
_____ . I understand the reasons and the description of the evaluation process that you provided and have checked the appropriate line below.

_____ Permission is given to conduct the evaluation as described.
_____ I do not give my permission for an evaluation.
_____ A conference is requested to discuss the proposed evaluation "before granting permission".

_____ _____
Child's Name *Parent's Signature*

_____ _____
Date of Birth *Date*

WHITE - Student's Cumulative Folder YELLOW - Parent [illegible]

M-S 125.60 (Rev. 5-[illegible])

DADE COUNTY PUBLIC SCHOOLS
EXCEPTIONAL STUDENT EDUCATION
SPEECH, LANGUAGE & HEARING

M-TEAM REFERRAL REPORT

Student's Name _____ Birthdate _____ Grade _____

School _____

AUDIOMETRIC SWEEP TEST

Hz

dB	250	500	1000	2000	4000	6000	8000
0							
10							
20							
30							
40							
50							
60							
70							
80							
90							
100							

Passed Hearing Test _____

Failed Hearing Test _____

Comments:

SPEECH/LANGUAGE SCREENING

Summary and Recommendations:

Signature of Speech Therapist _____ Date: _____

To be completed by the Speech Therapist servicing the student's school
This report is valid for one year from date of testing.

VISION SCREENING
M-TEAM REFERRAL REPORT

VISION SCREENING REPORT

NAME OF STUDENT _____ BIRTHDATE _____

ADDRESS _____
City State Zip Code

TELEPHONE _____ SEX _____ ETHNICITY _____

SCHOOL _____ GRADE _____ TEACHER _____

PARENT/GUARDIAN _____

Reason for referral: _____

_____

_____

	RIGHT	LEFT	BOTH
Visual Acuity without glasses:			
Visual Acuity with present glasses:			
Visual Acuity with prescription recommended:			

Results and Recommendation Summary: _____

_____

_____

_____

Date of Examination: _____

_____
Signature of Examiner

_____
Title

Dade County Public Schools

Division of Exceptional Student Education

ANECDOTAL RECORD

Student's Name _____ School _____ Teacher's Signature _____

Directions: This form is to be utilized by the teacher in consultation with a school psychologist. During a three week period, certain maladaptive behaviors will be targeted and recorded below.

Date/Time	Antecedent	Behavior	Consequence
Include duration of behavior, if applicable.	State what happened before behavior, including setting and/or possible cause.	State observed behaviors	State what happened following the behavior, such as the immediate response of teacher, student, others.

Form # 879-1559

MIS-22480 (01-8[illegible])

Dade County Public Schools

DEPARTMENT OF EXCEPTIONAL STUDENT EDUCATION

STUDENT OBSERVATION FORM

Student's Name _____ School _____ DOB _____

Teacher _____ Grade/Placement _____

Observer _____ Title _____

Description of setting:

Date:

Time:

Observations:

DIRECTIONS:

This form is to be used by a professional other than the teacher for the purpose of recording behavior within the school setting.

Code: 1 - *Sometimes* 3 - *Excessively*
2 - *Frequently* 4 - *Not Applicable or Not a Proble-*

(Continued ...)	1	2	3	NA
IV. h) Makes untrue statements				
i) Uses profanity				
j) Is sexually aggressive toward other students				
k) Identifies with the opposite sex				

Descriptions: _____

V. a) Is physically aggressive (hits, kicks, bites, etc.)				
b) Threatens teachers or students with bodily harm				
c) Is destructive (classroom materials, property, etc.)				

Descriptions: _____

VI. a) Has difficulty copying from chalkboard				
b) Has difficulty in accurately reproducing drawings, letters, or written words				
c) Has difficulty in imitating speech sounds				
d) Exhibits difficulty with gross motor skills: (lacks coordination, bumps into things, etc.)				
e) Seems to have difficulty with visual tracking: (skips lines, words, word endings, etc.)				
f) Has difficulty retaining and/or responding to oral directions				
g) Exhibits poor perception of spatial relationships				

Descriptions: _____

VII. a) Has difficulty in remembering ideas and concepts				
b) Has difficulty in remembering written words				
c) Has difficulty in remembering arithmetic processes				
d) Has difficulty in generalizing, abstracting, and reasoning				

Descriptions: _____

VIII. a) Exhibits perseverating behavior				
b) Rubs eyes, eyelids/eyes are inflamed				
c) Holds materials close to face				
d) Turns head to one side while listening or working				
e) Excessive absences/erratic attendance				

Descriptions: _____

DADE COUNTY PUBLIC SCHOOLS
DIVISION OF EXCEPTIONAL STUDENT EDUCATION

OBSERVATION OF STUDENT BEHAVIORS*

STUDENT'S NAME _____ BIRTHDATE _____

REFERRING TEACHER _____ SCHOOL _____

GRADE: _____ (for re-evaluations) EXCEPTIONALITY _____

DIRECTIONS: Identify characteristics which you feel are interfering with the student's functioning in your classroom. Estimate the severity of the behavior by placing an "X" in the appropriate column according to the code. Provide descriptions for behaviors exhibited excessively.

CODE: 1 - *Sometimes* 3 - *Excessively*
2 - *Frequently* NA - *Not Applicable* or *Not a Problem*

*Two (2) observations are required; one (1) must be done by the student's teacher.

		1	2	3	NA
I.	a) Acts impulsively				
	b) Talks out inappropriately				
	c) Appears hyperactive				
	d) Does not attend to task at hand				
	e) Lacks bladder control				
	f) Cries				

Descriptions: _____

II.

	a) Exhibits muscle spasms				
	b) Stutters				
	c) Cannot speak in front of others				
	d) Manifests fear of school				
	e) Becomes ill when upset or frustrated				
	f) Demonstrates inappropriate mood changes				

Descriptions: _____

III.

	a) Demonstrates pervasive expectation of failure				
	b) Avoids competitive activities				
	c) Prefers tasks considerably below instructional level				
	d) Selects overly difficult classroom tasks				

Descriptions: _____

IV.

	a) Daydreams				
	b) Avoids verbal communication				
	c) Does not participate in class activities				
	d) Avoids other children				
	e) Is ridiculed by peers				
	f) Is ignored by peers				
	g) Takes things belonging to others				

SUSPENSION RECORD

Date	Reason(s)

WHAT STEPS HAVE YOU TAKEN TO HELP THE STUDENT IMPROVE THE ABOVE BEHAVIORS?

ACADEMIC PERFORMANCE

ESTIMATED READING GRADE PLACEMENT _____

ESTIMATED ARITHMETIC GRADE PLACEMENT _____

DESCRIBE WRITING ABILITY _____

DESCRIBE LANGUAGE ABILITY _____

BASED UPON YOUR EXPERIENCES WITH THIS PUPIL, DO YOU BELIEVE A SIGNIFICANT DISCREPANCY EXISTS BETWEEN THIS PUPIL'S ABILITY AND HIS ACHIEVEMENT? _____

WHY? _____

TEACHER'S SIGNATURE: _____ DATE: _____

PRINCIPAL'S COMMENTS _____

PRINCIPAL'S SIGNATURE: _____ DATE: _____

MIS-21692 REV. (07-79)

APPENDIX D

M E M O R A N D U M

September 30, 1986

TO: Mr. Gil Lopez, Specialist in School Psychology
Exceptional Student Education
North Central Area

FROM: Susan Renick, Director
Exceptional Student Education
North Central Area

SUBJECT: CHILD STUDY TEAM MEETINGS FOR PRIVATE SCHOOL REFERRALS

Inasmuch as Child Study Teams for private school students conducted by you during 1985-86 were so successful in screening referrals, you are directed to continue them in the 1986-87 school year. The time spent in this activity was time and test effective and, therefore, must continue. If you have any questions, please direct them to Joe Drozd. Congratulations again on a job well done.

SR:JSD/ln